Address

Country

NAME

Signature

City

Bloomfield Hills

(Print/Type)

United States of America

PTO/SB/50 (08-00)

Zip Code

Registration No. (Attorney/Agent)

Date

48303

43,770

9-30-2003

248-641-0270

Approved for use through 12/30/2000. OMB 0651-0033

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## REISSUE PATENT APPLICATION TRANSMITTAL

	Attorney Docket No.	0315-000414/REF							
	First Named Inventor	Mark Bass et al.							
Address to: Mail Stop Patent Application	Original Patent Number	5,741,120							
Commissioner for Patents P.O. Box 1450	Original Patent Issue Date (Month/Day/Year)	April 21, 1998							
Alexandria, VA 22313-1450	Express Mail Label No.	EL 790 111 253 US							
APPLICATION FOR REISSUE OF:  Utility Patent  Design Patent  Plant Patent									
(sheek applicable box)									
APPLICATION ELEMENTS (37 CFR 1.1	····	G APPLICATION PARTS							
1. Tee Transmittal Form (e.g., PTO/SB/56)									
(Submit an original, and a duplicate for fee processi	'9/	37 CFR 1.173(c).							
2. Applicant claims small entity status. See 37 CFI	· · · · · · · · · · · · · · · · · · ·	8. Original U.S. Patent for surrender							
3. Specification and Claims in a double column copformat (amended, if appropriate)	· · · · · · · · · · · · · · · · · · ·	Ribboned Original Patent Grant  Statement of Loss (PTO/SB/55)							
4. Drawing(s) (proposed amendments, if appropria	to)								
5. Reissue Oath / Declaration (original or copy) (37 C.F.R. § 1.175)(PTO/SB/51 or 52)	9. [_] Foreign Priority Cla	9. Foreign Priority Claim (35 U.S.C. 119) (if applicable)							
6. Original U.S. Patent currently assigned?	10. Information Disclos	10. Information Disclosure Copies of IDS							
1	Statement (IDS)/P1	Statement (IDS)/PTO-1449 Citations							
Yes No	11. English Translation (if applicable)	n of Reissue Oath/Declaration							
(If Yes, check applicable box(es))	1 5	57							
Written Consent of all Assignees (PTO/SB/53)		13. Return Receipt Postcard (MPEP 503)  (Should be specifically itemized)							
37 C.F.R. § 3.73(b) Statement Power of (PTO/SB/96) Attorney	14. Other: <u>Check</u>	in the amount of \$906.00							
14. C	ORRESPONDENCE ADDRESS								
Customer Number or Bar Code Label	27572	or Correspondence address belo							
Harness, Dickey & Pierce, P.L.C.									
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F.O. BOX 020		_							

State

Telephone

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PTO/SB/56 (08-00)

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ork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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REISS	JE APP	LICATION	FEE TI				RM	031	5-0004	14/R	EF	
Claims as Filed - Part 1  Small Entity Other than a Small Entity												
Claims in Patent		For	Numbe Reissue	mber Filed in (3) sue Application Number Extra		Sma Rate	all En	fity Fee		Rate	Fee	
(A) 102		l Claims	(B) 106		**** 4						X\$ <u>18.00</u> =	72.00
(C) 14	(37 CFR 1.16(j)) Independent Claims (37 CFR 1.16(i))		(D) 15			=	X\$= X\$=			or -	X\$ <u>84.00</u> =	84.00
				Basic Fee (37 CFR 1.16(h			(h))	\$			\$ <u>750.00</u>	
Total Filing Fee \$ OR \$906.00											\$ 906.00	
				Claims as	Amer	nded - Par	2					
	(1)			(2 Highest Nu	<u>'</u> )	(3)		all E	ntity		Other than	a Small Entity
		Claims Remaining After Amendment		Previous Paid Fo	sly	Extra Claims Present	Rate		Fee		Rate	Fee
Total Cla	ims		MINUS			•	x\$_			or	x\$	0
(37 CFR 1.1	6(j)) 			**		=	=			1	=	
Independen Claims (37	t CFR 1.16(i))	***	MINUS	*****		=	X\$_  =				X\$	0
Total Additional F						al Fee		\$		OR	\$0	
<ul> <li>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</li> <li>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</li> <li>*** After any cancelation of claims</li> <li>*** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</li> <li>**** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</li> <li>☐ Applicant claims small entity status. See 27 CFR 1.27.</li> <li>☐ Please charge Deposit Account No. <u>08-0750</u> in the amount of A duplicate copy of this sheet is enclosed.</li> <li>☐ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>08-0750</u> . A duplicate copy of this sheet is enclosed.</li> <li>☐ A check in the amount of \$ <u>906.00</u> to cover the filing / additional fee is enclosed.</li> <li>☐ Payment by credit card. Form PTO-2038 is attached.</li> </ul>												
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization pn form PTD-2038.  Sep + 70 7003  Date  Signature of Applicant, Attorney or Agent of Record												
Michael Malinzak												
	Typed or printed name											

## UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

PATENT NO. : 5,741,120

DATED : April 21, 1998 INVENTOR(S): Mark Bass et al.

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Column 5, line 50, "In" should be -- in --.

Column 33, line 41, "74" should be -- 73 --.

Column 36, line 59, "84" should be -- 90 --.

Column 36, line 62, "84" should be -- 90 --.

Column 36, line 65, "86" should be "92".

Column 37, line 1, "87" should be "93".

Column 37, line 5, "88" should be "94

Signed and Sealed this

First Day of September, 1998

Attest:

BRUCE LEHMAN

Buce Tehman

Attesting Officer

Commissioner of Patents and Trademarks